#### OFFICE OF



## **UTAH**

AMBULATORY SURGERY DATABASE

## 1998 PUBLIC-USE DATA FILE USERS' MANUAL

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UTAH HEALTH DATA COMMITTEE
OFFICE OF HEALTH CARE STATISTICS
UTAH DEPARTMENT OF HEALTH

288 NORTH 1460 WEST, Box 144004 SALT LAKE CITY, UTAH 84114-4004 Phone: (801) 538-6700 Fax: (801) 538-9916

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#### INTRODUCTION

#### **Utah Ambulatory Surgery Data Base:**

Administrative Rule R428.11 became effective in March, 1998, and mandates that all Utah licensed hospital and freestanding ambulatory surgical facilities shall report information on ambulatory surgery discharges, beginning with January 1, 1996. The data base contains the consolidated information on complete billing, medical codes, and personal characteristics describing a patient, the services received, and charges billed for each ambulatory surgical stay. Fifty Six Utah surgical facilities submitted data in 1998.

#### Public-Use Data Files (PDF):

The Ambulatory Surgery Public-Use Data Files are designed to provide general health care information to a wide spectrum of users with minimal controls. A request for a PDF can be approved by the Director of the Health Care Statistics without further review.

Two different public data files are released for 1998 hospital discharge data (see page 6 for data elements and file descriptions).

#### **Data Processing and Quality:**

<u>Data submission</u>: The Health Data Plan provides data element definitions to ensure all hospitals will report similar data. The Office of Health Care Statistics receives discharge data quarterly from ambulatory surgical facilities in various formats and media. The data are converted into a standardized format.

System Edits: The data are validated through a process of automated editing and report verification. Each record is subjected to a series of edits that check for accuracy, consistency, completeness, and conformity with the definitions specified in the Data Submittal Manual. Records failing the edit check are returned to the data supplier for correction or comment.

<u>Facility Reviews</u>: Each facility is provided with a 35 day review periods to validate the committee's data against their facility records. Any inconsistencies discovered by the facilities are reevaluated or corrected.

<u>Missing Values</u>: When dealing with unknown values, it is important to distinguish between <u>systematic</u> omission by facility (e.g., for facilities that were granted reporting exemption for particular data elements or which had coding problems that deemed the entire data from the hospital unusable), and <u>non-systematic</u> omission (e.g., coding problems, invalid codes, etc.). While systematic omission creates potential bias, non-systematic omission is assumed to occur randomly. The user is advised to examine missing values by facility for each data element to be used.

#### **Patient Confidentiality:**

The Committee has taken considerable efforts to ensure that no individual patient could be identified from the PDF. Patient's age, diagnosis codes, physician's specialty, and payers are grouped. Several data elements are encrypted under specific conditions: (1) Utah zip codes with less than 30 discharges in a calendar year and non-Utah zip codes are coded at the state level.

#### **Agreement to Protect Patient Confidentiality:**

The data collected by the Health Data Committee may be used only for the purpose of health statistical reporting and analysis or specified in the user's written request for the data; any effort to determine the identity of any reported cases is prohibited. No one will attempt to link this data set with individually identifiable records from any other data sets.

#### Notes on the 1998 Ambulatory Surgery Data:

This is the third year of statewide reporting of ambulatory surgery data in the State of Utah. Data suppliers' information systems vary considerably, as do formats. Facility to facility comparisons are not encouraged for the first three years of data. Comparing hospital-based to freestanding surgery center facilities will be especially challenging due to the differences in billing practice and general operations. Coding practices and formats will evolve over time as the data suppliers adapt to this new statewide reporting requirement.

The data are collected from two types of facilities: hospital-based ambulatory surgery centers and freestanding ambulatory surgery centers. These facilities varied in their reporting of procedure codes in 1998. Most hospital-based surgery centers reporting ICD9 procedures codes while the freestanding ambulatory surgery centers reported CPT4 procedure codes. There is no effective "crosswalk" tool to translate or compare these two procedure coding methods. Therefore, the user will have to be careful in how these data are used. Administrative Rule R428-11 was revised to require reporting of

both ICD9 and CPT4 procedure codes starting with the surgeries performed in 1998. Facilities were asked to resubmit the data in order to have both the ICD9 and CPT codes on the records but not all facilities were able to do so. The data includes a code to indicate whether the data contains only ICD9, only CPT4 or both.

#### **Data Format:**

Standard format for the public data file is zipped in ASCII code, on a set of 3 ½ diskettes. The information is also available on CD-ROM. Requests for other formats will be considered.

#### Citation:

Any statistical reporting or analysis based on the data shall cite the source as the following:

Utah Ambulatory Surgical Data File (1998). Utah Health Data Committee/Office of Health Care Statistics, Utah Department of Health. Salt Lake City, Utah. 1998.

#### Redistribution:

User **shall not redistribute** the Utah Ambulatory Surgical Data File in its original format. User **shall not redistribute** any data products derived from the file without written permission form the Office of Health Care Statistics, Utah Department of Health.

## FILE LAYOUT

# DESCRIPTION OF DATA ELEMENTS

#### **Provider Identifier:**

Hospital from which patient was discharged.

- 101 = BEAVER VALLEY HOSPITAL
- 102 = MILFORD VALLEY MEMORIAL HOSPITAL
- 103 = BRIGHAM CITY COMMUNITY HOSPITAL
- 104 = BEAR RIVER VALLEY HOSPITAL
- 105 = LOGAN REGIONAL HOSPITAL
- 106 = CASTLEVIEW HOSPITAL
- 107 = LAKEVIEW HOSPITAL
- 108 = DAVIS HOSPITAL & MEDICAL CENTER
- 109 = UINTAH BASIN MEDICAL CENTER
- 110 = GARFIELD MEMORIAL HOSPITAL
- 111 = ALLEN MEMORIAL HOSPITAL
- 112 = VALLEY VIEW MEDICAL CENTER
- 113 = CENTRAL VALLEY MEDICAL CENTER
- 114 = KANE COUNTY HOSPITAL
- 115 = FILLMORE COMMUNITY MEDICAL CENTER
- 116 = DELTA COMMUNITY MEDICAL CENTER
- 117 = JORDAN VALLEY HOSPITAL
- 118 = ALTA VIEW HOSPITAL
- 119 = COTTONWOOD HOSPITAL
- 120 = SALT LAKE REGIONAL MEDICAL CENTER
- 121 = LDS HOSPITAL
- 122 = PRIMARY CHILDREN S MEDICAL CENTER
- 124 = HCA ST. MARK S HOSPITAL
- 125 = UNIVERSITY OF UTAH HOSPITAL
- 126 = PIONEER VALLEY HOSPITAL
- 128 = SAN JUAN HOSPITAL
- 129 = GUNNISON VALLEY HOSPITAL
- 130 = SANPETE VALLEY HOSPITAL
- 132 = SEVIER VALLEY HOSPITAL
- 133 = TOOELE VALLEY REGIONAL MEDICAL CENTER
- 134 = ASHLEY VALLEY MEDICAL CENTER
- 135 = OREM COMMUNITY HOSPITAL
- 136 = AMERICAN FORK HOSPITAL
- 137 = MOUNTAIN VIEW HOSPITAL
- 138 = UTAH VALLEY MEDICAL CENTER
- 139 = WASATCH COUNTY HOSPITAL
- 140 = DIXIE MEDICAL CENTER
- 141 = MCKAY DEE HOSPITAL
- 142 = OGDEN REGIONAL MEDICAL CENTER
- 144 = TIMPANOGOS REGIONAL HOSPITAL
- 201 = BENCHMARK REGIONAL HOSPITAL

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203 = CPC OLYMPUS VIEW HOSPITAL
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204 = COPPERHILLS YOUTH CENTER

206 = UNIVERSITY NEUROPSYCHIATRIC INSTITUTE

207 = CHARTER CANYON BEHAVIORAL HLTH SYSTEM

209 = UTAH STATE HOSPITAL

301 = SOUTH DAVIS COMMUNITY HOSPITAL

302 = HIGHLAND RIDGE HOSPITAL

304 = BONNIVILLE HEALTH & REHABILITATION

305 = SHRINERS HOSPITAL

306 = HEALTHSOUTH REHABILITATION HOSPITAL OF UTAH

307 = THE ORTHOPEDIC SPECIALTY HOSPITAL

401 = CENTRAL UTAH SURGICAL CENTER

402 = INSTITUTE OF FACIAL SURGERY

403 = INTERMOUNTAIN SURGICAL CENTER

404 = MCKAY-DEE SURGICAL CENTER

405 = PROVO SURGICAL CENTER

406 = SALT LAKE ENDOSCOPY CENTER

407 = SALT LAKE SURGICAL CENTER (HEALTHSOUTH)

408 = ST. GEORGE SURGICAL CENTER

409 = ST. MARK'S OP SURGICAL CENTER

410 = THE SURGICARE CENTER OF UTAH

411 = WASATCH ENDOSCOPY CENTER

412 = WASATCH SURGERY CENTER

413 = WESTERN MEDICAL, INC.

414 = MOUNT OGDEN SURGICAL CENTER

415 = DAVIS SURGICAL CENTER

416 = MORAN EYE CENTER

417 = SOUTH TOWNE SURGICAL CENTER

801 = VETERANS HOSPITAL

803 = USAF HOSPITAL HILL/SGA

#### Patient's Age (as of last birthday) at the Date of Discharge:

0 = 1-28 days

1 = 29-365 days

2 = 1 - 4

3 = 5 - 9

4 = 10-14

5 = 15-17

6 = 18 - 19

7 = 20 - 24

8 = 25 - 29

9 = 30 - 34

10 = 35 - 39

11 = 40 - 44

12 = 45 - 49

13 = 50 - 54

14 = 55 - 59

15 = 60 - 64

16 = 65 - 69

17 = 70 - 74

18 = 75 - 79

19 = 80 - 84

20 = 85 - 89

21 = 90 +

66 = Encrypted (confidential data)

99 = Unknown

. = Not reported

#### Patient's Gender:

M = Male

F = Female

U = Unknown

E = Encrypted (confidential data)

Blank = Not reported

#### Type of Admission:

1 = Emergency

2 = Urgent

3 = Elective

4 = Newborn

9 = Unknown

Blank = Not reported

#### Patient's Status:

01 = Discharge to home or self care, routine discharge

02 = Discharge/transferred to another short-term general hospital

03 = Discharge/transferred to skilled nursing facility

04 = Discharge/transferred to an intermediate care facility

05 = Discharged/transferred to another type of institution

06 = Discharge/transferred to home under care of organized home health service organization

07 = Left against medical advice

08 = Discharged/transferred to home under care of a home IV provider

20 = Expired

40 = Expired at home

41 = Expired in a medial facility; i.e. hospital, skilled nursing facility, intermediate care facility, or free standing hospice

42 = Expired - place unknown

09 = Unknown

Blank = Not reported

#### Patient's Residential Zip Code:

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84000-84799 = Zip codes in Utah

-6666 = Encrypted (confidential data)

-8888 = Unknown

-9999 = Outside U.S.

Blank = Not reported
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If less than 30 discharges occurred for a Utah zip code area, this zip code was mapped into the county code:

Beave = Beaver BoxEI = Box ElderCache = Cache Carbo = Carbon Dagge = Daggett Davis = Davis Duche = Duchesne Emery = Emery Garfi = Garfield Iron = Iron Milla = Millard Morga = Morgan MulCo = Multi county Piute = Piute Rich = RichSaltL = Salt Lake SanJu = San Juan Sanpe = Sanpete Sevie = Sevier Summi = Summit Tooel = Tooele Uinta = Uintah Washi = Washington Wayne = Wayne Weber = Weber

If less than 30 discharges occurred for a non Utah zip code area, this zip code was mapped into the state code:

AL = ALABAMA AK = ALASKA AZ = ARIZONAAR = ARKANSAS = CALIFORNIA CA CO = COLORADO CT = CONNECTICUT DE = DELAWARE DC = DISTRICT OF COLUMBIA FL = FLORIDA GA = GEORGIA

= HAWAII

= IDAHO

HI

ID

IL = ILLINOIS

IN = INDIANA

IA = IOWA

KS = KANSAS

KY = KENTUCKY

LA = LOUISIANA

ME = MAINE

MD = MARYLAND

MA = MASSACHUSETTS

MI = MICHIGAN

MN = MINNESOTA

MS = MISSISSIPPI

MO = MISSOURI

MT = MONTANA

NB = NEBRASKA

NV = NEVADA

NH = NEW HAMPSHIRE

NJ = NEW JERSEY

NM = NEW MEXICO

NY = NEW YORK

NC = NORTH CAROLINA

ND = NORTH DAKOTA

OH = OHIO

OK = OKLAHOMA

OR = OREGON

PA = PENNSYLVANIA

RI = RHODE ISLAND

SC = SOUTH CAROLINA

SD = SOUTH DAKOTA

TN = TENNESSEE

TX = TEXAS

UT = UTAH

VT = VERMONT

VA = VIRGINIA

WA = WASHINGTON

WV = WEST VIRGINIA

WI = WISCONSIN

WY = WYOMING

PR = PUERTO RICO

GQ = GUAM

#### **Patient's Residential County:**

- 1= Box Elder
- 2= Cache
- 3= Rich
- 4= Morgan
- 5= Weber
- 6= Davis
- 7= Salt Lake
- 8= Summit
- 9= Tooele
- 10= Utah
- 11= Wasatch
- 12= Daggett
- 13= Duchesne
- 14= Uintah
- 15= Juab
- 16= Millard
- 17= Piute
- 18= Sanpete
- 19= Sevier
- 20= Wayne
- 21= Carbon
- 22= Emery
- 22- 211101
- 23= Grand
- 24= San Juan
- 25= Beaver
- 26= Garfield
- 27= Iron
- 28= Kane
- 29= Washington
- 30= Multi-county Zip Codes
- 77= Outside Utah
- 88= Unknown
- 99= Outside U.S.

#### **Suggested Division of Local Areas:**

Definition	County Code (see above)
1. Urban vs. Rural	
Urban Areas	5,6,7,10
Rural Areas	1-4, 8-9, 11-29
Excluding	30,77,88,99
2. Wasatch Front Area	
Yes	5,6,7,10

No	1-4, 8-9, 11-29
Excluding	30,77,88,99
3. Local Health Districts	
Bear River	1-3
Weber-Morgan	4-5
Davis County	6
Salt Lake County	7
Summit County	8
Tooele County	9
Utah County	10
Wasatch County	11
Uintah Basin	12-14
Central Utah	15-20
Southeastern Utah	21-24
Southwest Utah	25-29

#### Patient's Cross-County Migrant Status:

Y = Yes

N = No

U = Unknown

#### Patient's Marital Status:

S = Single

M = Married

X = Legally Separated

D = Divorced

W = Widowed

U = Unknown

Blank = Not reported

#### **Principal Diagnosis Code:**

ICD-9-CM code. Refer to <u>International Classification of Diseases (9th Revision):</u> <u>Clinical Modification</u> for description.

Blank = Not reported

#### **Secondary Diagnosis Code 1:**

Definition and category are the same as Principal Diagnosis Code

#### **Secondary Diagnosis Code 2:**

Definition and category are the same as Principal Diagnosis Code

#### **Secondary Diagnosis Code 3:**

Definition and category are the same as Principal Diagnosis Code

#### **Secondary Diagnosis Code 4:**

Definition and category are the same as Principal Diagnosis Code

#### **Secondary Diagnosis Code 5:**

Definition and category are the same as Principal Diagnosis Code

#### **Secondary Diagnosis Code 6:**

Definition and category are the same as Principal Diagnosis Code

#### **Secondary Diagnosis Code 7:**

Definition and category are the same as Principal Diagnosis Code

#### **Secondary Diagnosis Code 8:**

Definition and category are the same as Principal Diagnosis Code

#### Procedure Code Type:

0 = ICD9-CM code

1 = CPT-4 code

2 = Both ICD9-CM and CPT4 codes

#### **Principal Procedure Code:**

ICD-9-CM code. Refer to <u>International Classification of Diseases (9th Revision):</u> <u>Clinical Modification</u> for description.

CPT code. Refer to <u>Physicians Procedure Current Terminology</u> for description.

Blank = Not reported

#### **Secondary Procedure Code 1:**

Definition and category are the same as Principal Procedure Code

#### **Secondary Procedure Code 2:**

Definition and category are the same as Principal Procedure Code

#### **Secondary Procedure Code 3:**

Definition and category are the same as Principal Procedure Code

#### **Secondary Procedure Code 4:**

Definition and category are the same as Principal Procedure Code

#### **Secondary Procedure Code 5:**

Definition and category are the same as Principal Procedure Code

#### Total Charge\*:

Total dollars and cents amount charged for the discharge (with 2 decimal digits).

= Not Reported

#### **Primary Payer Category:**

- 01 = Medicare
- 02 = Medicaid
- 03 = Other government
- 04 = Blue cross/blue shield
- 05 = Other commercial
- 06 = Managed care
- 07 = Self pay
- 08 = Industrial and worker's compensation
- 09 = Unclassified
- 10 = Unknown

Blank = Not reported

#### **Secondary Payer Category:**

Descriptions are the same as first payer category.

#### **Third Payer Category:**

Descriptions are the same as first payer category.

#### Patient's Relationship to the First Insured Person:

- 1 = Patient is the named insured
- 2 = Spouse
- 3 = Natural Child/insured financial responsibility
- 4 = Natural Child/insured does not have financial responsibility
- 5 = Step Child
- 6 = Foster Child
- 7 = Ward of the Court (Patient is ward of the insured as a result of a court order.)
- 8 = Employee (The patient is employed by the named insured.)
- 9 = Unknown
- 10 = Handicapped Dependent (Dependent child whose coverage extends beyond normal termination age limits as a result of laws or agreements extending coverage.)
- 11 = Organ Donor (Code is used in cases where bill is submitted for care given to organ donor where such care is paid by the receiving patient's insurance coverage.)
- 12 = Cadaver Donor (Code is used where bill is submitted for procedures performed on cadaver donor where such procedures are paid by the receiving patient's insurance coverage.)
- 13 = Grandchild
- 14 = Niece or Nephew
- 15 = Injured Plaintiff (Patient is claiming insurance as a result of injury covered by insured.)
- 16 = Sponsored Dependent (Individual not normally covered by insurance coverage but coverage has been specially arranged to include relationships such as grandparent or former spouse that would require further investigation by the payer.)

- 17 = Minor Dependent of a Minor Dependent (Code is used where patient is a minor and a dependent of another minor who in turn is a dependent, although not a child, of the insured.)
- 18 = Parent
- 19 = Grandparent
- 99 = Unknown

#### **Procedure Category** (Principal through 6th):

- 0 = No match for Procedure Category
- 1 = Musculosketal
- 2 = Respiratory
- 3 = Cardiovascular
- 4 = Lymphatic/Hematic
- 5 = Diaphragm
- 6 = Digestive System
- 7 = Urinary
- 8 = Male Genital
- 9 = Laparposcopy
- 10= Female Genital
- 11= Endocrine/Nervous
- 12= Eye
- 13= Ear
- 14= Nose, Mouth, Pharynx
- 15= Mastectomy

#### **Discharge Quarter:**

1 = First Quarter	(Jan.1 to March 31)
2 = Second Quarter	(April 1 to June 30)
3 = Third Quarter	(July 1 to Sept. 30)
4 = Fourth Quarter	(Oct. 1 to Dec. 31)

#### **Record ID Number:**